

**UTILITY PATENT APPLICATION TRANSMITTAL**  
**(Only for new nonprovisional applications under 37 CFR 1.53(b))**

22387 U.S. PTO  
10/693553  
102403

Docket No. : 50727/KMO/W112  
Inventor(s) : Robert A. Mest  
Title : CATHETER WITH ABLATION NEEDLE AND MAPPING  
ASSEMBLY  
Express Mail Label No. : EV351235895US

**ADDRESS TO:** Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

October 24, 2003

1.  X  **FEE TRANSMITTAL FORM** *(Submit an original, and a duplicate for fee processing).*

2. **IF A CONTINUING APPLICATION**

\_\_\_\_\_ This application is a \_\_\_\_\_ of patent application No. \_\_\_\_\_.

Prior application information: Examiner ; Group Art Unit: \_\_\_\_\_.

\_\_\_\_\_ This application claims the benefit of Provisional Application No. \_\_\_\_\_ pursuant to 35 U.S.C. §119(e) and 37 CFR §1.78(a)(4).

3. **APPLICATION COMPRISED OF**

**Specification**

22  Specification, claims and Abstract (total pages)

**Drawings**

11  Sheets of formal drawing(s) (FIGS. 1 to 12)

**Declaration and Power of Attorney**

\_\_\_\_\_ Newly executed

X  Unexecuted declaration

\_\_\_\_\_ Copy from a prior application (37 CFR 1.63(d))(for continuation and divisional)

4. \_\_\_\_\_ **Microfiche Computer Program** *(Appendix)*

5. \_\_\_\_\_ **Nucleotide and/or Amino Acid Sequence Submission** *(if applicable, all necessary)*

\_\_\_\_\_ Computer Readable Copy

\_\_\_\_\_ Paper Copy (identical to computer copy)

\_\_\_\_\_ Statement verifying identity of above copies

6. **APPLICANT(S) STATUS UNDER 37 CFR §1.27**

\_\_\_\_\_ Applicant(s) and any others associated with it/them under §1.27(a) are a SMALL



23363

PATENT TRADEMARK OFFICE

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**ENTITY**

**7. ALSO ENCLOSED ARE**

- ☐ Request and Certificate under 35 U.S.C. §122(b)(2)(B)(i) **Request for Non-Publication**
- ☐ Preliminary Amendment
- ☐ Includes "Cross-Reference to Related Applications"
- ☐ A Petition for Extension of Time for the parent application and the required fee are enclosed
- ☐ An Assignment of the invention with the Recordation Cover Sheet and the recordation fee are enclosed
- ☐ This application is owned by pursuant to an Assignment recorded at Reel , Frame
- ☐ Information Disclosure Statement (IDS)/PTO/SB/08A/B
- ☐ Copies of IDS Citations
- ☐ Certified copy of Priority Document(s) (*if foreign priority is claimed*)
- ☐ English Translation Document (*if applicable*)
- ☒ Return Receipt Postcard (MPEP 503) (should be specifically itemized).
- ☐ Other:

**8. CORRESPONDENCE ADDRESS**

**CHRISTIE, PARKER & HALE, LLP, P.O. BOX 7068, PASADENA, CA 91109-7068**  
**Customer Number: 23363**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

  
Kathleen M. Olster

Reg. No. 42,052

626/795-9900

**FEE TRANSMITTAL  
UTILITY PATENT APPLICATION**

**DATE: October 24, 2003**

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Inventor(s) : Robert A. Mest  
Title : CATHETER WITH ABLATION NEEDLE AND MAPPING ASSEMBLY

Duplicate \_\_\_\_

**FEE DETERMINATION**

CLAIMS AS FILED					
	NUMBER FILED	NUMBER EXTRA	SMALL ENTITY RATE	LARGE ENTITY RATE	FEE
TOTAL CLAIMS	17 - 20	= 0	0 x \$9.00	0 x \$18.00	-0-
INDEPENDENT CLAIMS	1 - 3	= 0	0 x \$43.00	0 x \$86.00	-0-
MULTIPLE-DEPENDENT CLAIMS FEE			\$145.00	\$290.00	-0-
BASIC FEE			\$385.00	\$770.00	770.00
TOTAL FILING FEE					\$770.00
List Independent Claims: 1					

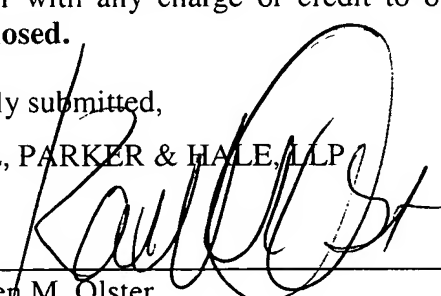
**METHOD OF PAYMENT**

  X   Payment Enclosed: Check for **\$770.00**.

  X   The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required during the **entire pendency** of the application to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A duplicate copy of this sheet is enclosed.**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By   
Kathleen M. Olster  
Reg. No. 42,052  
626/795-9900